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26479 7590 05/19/2005

STRAUB & POKOTYLO
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 TINTON FALLS, NJ 07724

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Michael P. Straub

(Depositor's name)

Michael P. Straub

(Signature)

May 27, 2005

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/551,078 | 04/18/2000 | Rajiv Laroia | 15-8-4-1 | 1876 |

TITLE OF INVENTION: BASE STATION IDENTIFICATION IN ORTHOGONAL FREQUENCY DIVISION MULTIPLEXING BASED SREAD SPECTRUM MULTIP ACCESS SYSTEMS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$0 | \$1400 | 08/19/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| BURD, KEVIN MICHAEL | 2631 | 375-132000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Straub & Pokotylo

2 Michael P. Straub

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Flarion Technologies, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bedminster, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael P. Straub

Date May 27, 2005

Typed or printed name

Michael P. Straub

Registration No. 36,941

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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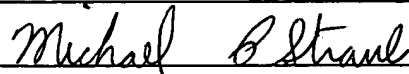
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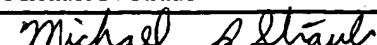
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|---|-----------------------------|---|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/551,078 |
| | Filing Date | April 18, 2000 |
| | First Named Inventor | Rajiv Laroia |
| | Group Art Unit | 2631 |
| | Examiner Name | Kevin Michael Burd |
| Total Number of Pages in This Submission | | Attorney Docket Number Flarion-50L (9) |

| ENCLOSURES (check all that apply) | | |
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| <input checked="" type="checkbox"/> Fee Transmittal Form (Form PTOL-85B) | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
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| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Michael P. Straub (Reg. No. 36,941) |
| Signature |  |
| Date | May 27, 2005 |

| CERTIFICATE OF MAILING | | | |
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| Signature |  | Date | May 27, 2005 |

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